

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Joseph ROBERTS *et al.*
Title: PROTECTING THERAPEUTIC
COMPOSITIONS FROM HOST-
MEDIATED INACTIVATION

Appl. No.: Unassigned

Filing Date: October 9, 2001

Examiner: Unassigned

Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

☒ Specification, Claim(s), and Abstract (41 pages).

☒ Informal drawings (9 sheets, Figures 1-9).

- ☒ Declaration and Power of Attorney (4 pages).
- ☐ Assignment of the invention to ME MEDICAL ENZYMES AG.
- ☐ Assignment Recordation Cover Sheet.
- ☐ Small Entity statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of ___ listed reference(s).
- ☐ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$740.00	\$740.00
Total Claims:	40	- 20	= 20	x \$18.00	= \$360.00
Independents:	5	- 3	= 2	x \$84.00	= \$168.00
If any Multiple Dependent Claim(s) present:				+ \$280.00	= \$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration				+ \$130.00	= \$0.00
				SUBTOTAL:	= \$1268.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):					= \$0.00
				TOTAL FILING FEE:	= \$1,268.00

- ☒ A check in the amount of \$1,268.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 5 October 2001

By S. A. Bent

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